PART B - FEE(S) TRANSMITTAL

| MAR U 6 2009 | 8 | her with applicable | or <u>Fax</u> | Commissioner P.O. Box 1450 Alexandria, Vi (571)-273-2885 | for Patent rginia 223 | 13-1450 | |
|---|---|--|---|---|---|--|--|
| INSTRUCTIONS: THE appropriate ACE MAN Correcte indicated unless correcte maintenance fee notification | form should be used to correspondence including below or directed others. | or transmitting the ISSU on transmitting the Patent, advance on the provided in Block 1, by (a | JE FEE and PUBLIC rders and notification a) specifying a new c | CATION FEE (if re of maintenance fee- correspondence addre | quired). Bloc s will be mai ess; and/or (b | cks 1 through 5 sho iled to the current co) indicating a separa | uld be completed wher prrespondence address a te "FEE ADDRESS" fo |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Fec(s) Transmittal. | This certificat | te cannot be used for | domestic mailings of the any other accompanying or formal drawing, mus |
| 28112 | have its own certific | ate of mailing | g or transmission. | 0. 10a. a.ag,a. | | | |
| SAILE ACKER 28 DAVIS AVE POUGHKEEPSI | I hereby certify that States Postal Service addressed to the M transmitted to the U | Certificate of this Fcc(s) T c with suffici lail Stop ISS SPTO (571) 2 | Mailing or Transmi Fransmittal is being d ent postage for first of SUE FEE address ab 273-2885, on the date | ssion cposited with the United class mail in an envelop- cove, or being facsimile cindicated below. | | | |
| | | | | Stube | 1 By | Welman | (Depositor's name) |
| | | | | <u> </u> | - Ph | \sim | (Signature) |
| | | | | Mason | 3, 20 | 09 | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVEN | ITOR | ATTORNI | EY DOCKET NO. | CONFIRMATION NO. |
| 10/667,842 TITLE OF INVENTION: | 03/ | | S03-016 C REGAY2 00000064 1 | 1029 1 90033 1066784 2 | | | |
| THE ST HAVE AND IN | COLOR TRACTIVIES | VI OI DISIENT SCREE | | 01 02 | FC:2501 FC:1504 FC:8001 | 755.00 DA 300.00 DA 21.00 DA | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE | | | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$15/0 8755 | \$300 | \$0 | I | \$18/0 5/055 | 03/30/2009 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | 5 | | | |
| ABDIN, SHAHEDA A | | 2629 | 345-083000 | | | | |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form (1) the names of or agents OR, all (2) the name of registered attorn | | | | a single firm (having as a member a cy or agent) and the names of up to nt attorneys or agents. If no name is will be printed. 2 | | | |
| (A) NAME OF ASSIG | NEE | NDUCTOR 6. | (B) RESIDENCE: (C | CITY and STATE OF | R COUNTRY | | |
| Please check the appropria | ate assignee category or | categories (will not be pr | inted on the patent): | ☐ Individual 🛣 | Corporation (| or other private group | entity Government |
| 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown abov X Issue Fee | | | | | | | iency or credit any |
| | SMALL ENTITY statu | is. See 37 CFR 1.27. | ☐ b. Applicant is no | o longer claiming SM | ALL ENTIT | Y status. Sec 37 CFR | 1.27(g)(2). |
| NOTE: The Issue Fee and interest as shown by the re | cords of the United Sta | ured) will not be accepted tes Patent and Trademark | u from anyone other the Office. | nan the applicant; a re | egistered attor | rncy or agent; or the a | issignee or other party in |
| Authorized Signature | 8317 | 2 | | Date | March | h 3, 2009 | |
| Typed or printed name | Stephen B | AULLINAN | | Registration | | 7,711 | |
| This collection of informa an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 | tion is required by 37 Cality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC 3-1450. | FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (| on is required to obtain 1.14. This collection is depending upon the e Chief Information C COMPLETED FORM | n or retain a benefit b is estimated to take 1 individual case. Any officer, U.S. Patent and S TO THIS ADDRE | y the public w 2 minutes to comments or and Trademark SS. SEND To | which is to file (and by complete, including a n the amount of time c Office, U.S. Departr O: Commissioner for | y the USPTO to process gathering, preparing, and you require to complete nent of Commerce, P.O. Patents, P.O. Box 1450 |

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.